

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	W.A.		02/29/01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	UT	31508	10-8-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

☒ Rejected
☐ Allowed
☐ (Through numeral) Canceled
☐ Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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830
10/01/01

WARNING
The Information
Possession of

Form PTO-436A
(Rev. 6/90)